6. Name and Address of Current Registered Agent

## ~ 2006 FOR PROFIT CORPORATION **FILED ANNUAL REPORT** Apr 24, 2006 08:00 AN Secretary of State **DOCUMENT # J07419** 1. Entity Name

NORTHEASTERN IN	NES I MEM	15, INC.		
Principal Place of Business 1001 E ATLANTIC AVE.		Mailing Address 1000 MARKET ST	· · · · · · · · · · · · · · · · · · ·	
STE. 202 PORTSMOUTH, NH 03801	us	BLDG 1 PORTSMOUTH, NH 03801	US	

## DO NOT WRITE IN THIS SPACE

01192006	No Cng-P	CR2E034 (1	(±034 (11/05)		
4. FEI Number	r		Applied For		
59-2653	1841	, . <del></del> .	Not Applicable		

\$8.75 Additional 5. Certificate of Status Desired Fee Required

CRITCHFIELD, RICHARD H. 1001 E. ATLANTIC AVE.

## DO NOT WRITE

DELRAY BEACH, FL 33483			IN THIS SPACE			
	named entity submits this statement for the pions of registered agent.	ourpose of changing its registered	d office or r	egistered agent, or bo	th, in the State of Florida. I am familiar with, and acce	pt
SIGNATURE.	Signature, typed or printed name of registered agent and site	d applicable. (NOTE Registered		grequired when reinstating)	DATE	. * . <u>.</u> .
FIL After M	E NOW!!! FEE IS \$150.00 ay 1, 2006 Fee will be \$550.00	Election Campaign Finance     Trust Fund Contribution.	ing	\$5.00 May Be Added to Fees		
10.	OFFIÇERS AND DIREC	OTORS				
TITLE NAME STREET ADDRESS CITY+ST-ZIP	PD WALSH, MARK 1001 E ATLANTIC AVE. DELRAY BEACH, FL_33483				U00000529567 05/05/06-80081-014 150.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S CRITCHFIELD, RICHARD H. 1001 E ATLANTIC AVE. DELRAY BEACH, FL 33483	·			03/ 03/ 03/ 03/ 03/03/ 03/03/ 03/ 03/ 03	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			!	IN '	THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP					, e	
TITLE NAME STREET ADDRESS CITY-ST-ZIP						_
12. I hereby	certify that the information supplied with this fi	lling does not qualify for the exer	nptions co	ntained in Chapter 11	9. Florida Statutes. I further certify that the information of as if made under cath, that I am an officer or director.	l ar

of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.